### Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 1 of 46

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Catherine First name  M. Middle name		First name  Middle name
	Bring your picture identification to your meeting with the trustee.	Fallon Last name and Suffix (Sr., Jr., II, III)	-	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3489		

Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 2 of 46

Case number (if known)

Debtor 1 Catherine M. Fallon

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 640 W. Terrace Villa Park, IL 60181 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **DuPage** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Entered 06/06/18 10:24:30 Desc Main Page 3 of 46 Case 18-16185 Doc 1 Filed 06/06/18

Document Case number (if known) Debtor 1 Catherine M. Fallon

about how you may pay. Typically, if you are paying the fee yourself, you may pay with order. If your attorney is submitting your payment on your behalf, your attorney may be a pre-printed address.    need to pay the fee in installments. If you choose this option, sign and attach the AThe Filling Fee in Installments (Official Form 103A).   request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 1 applies to your family size and you are unable to pay the fee in installments). If you choose this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 1 applies to your family size and you are unable to pay the fee in installments). If you choose this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 1 applies to you family size and you are unable to pay the fee in installments). If you choose this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 1 applies to you applies to you are waive filing for the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Applicat	
Chapter 7 Chapter 11 Chapter 12 Chapter 13    Chapter 13   Chapter 13   Chapter 13   Chapter 13   Chapter 13   Chapter 13   Chapter 13   Chapter 13   Chapter 13   Chapter 13   Chapter 13   Chapter 14   Chapter 15   Chapter 15   Chapter 15   Chapter 16   Chapter 17   Chapter 18   I will pay the entire fee when I file my petition. Please check with the clerk's office in about how you may pay. Typically, if you are paying the fee yourself, you may pay with order. If you rationey is submitting your payment on your behalf, your and you pay pay per perpinted address.   I need to pay the fee in installments. If you choose this option, sign and attach the A The Filing Fee Installments (Official Form 103A).   I request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 1 applies to your family size and you are unable to pay the fee in installments). If you che the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the last 8 years?   No.	
Chapter 12	
Chapter 13	
Section   Sect	
about how you may pay. Typically, if you are paying the fee yourself, you may pay with order. If you attorney is submitting your payment on your behalf, your attorney may pay pre-printed address.    need to pay the fee in installments. If you choose this option, sign and attach the AThe Filling Fee in Installments (Official Form 103A).   request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 1 applies to your family size and you are unable to pay the fee in installments). If you cho the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in	
about how you may pay. Typically, if you are paying the fee yourself, you may pay with order. If you attorney is submitting your payment on your behalf, your attorney may pay pre-printed address.    need to pay the fee in installments. If you choose this option, sign and attach the AThe Filling Fee in Installments (Official Form 103A).   request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 1 applies to your family size and you are unable to pay the fee in installments). If you cho the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filling Fee Waived (Official Form 103B) and file in	
The Filing Fee in Installments (Official Form 103A).    Irequest that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 1: applies to your family size and you are unable to pay the fee in installments). If you che the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Cha	v, if you are paying the fee yourself, you may pay with cash, cashier's check, or money
I request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than 1: applies to your family size and you are unable to pay the fee in installments). If you che the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and fil	
but is not required to, waive your fee, and may do so only if your income is less than 1 applies to your family size and you are unable to pay the fee in installments). If you che the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file	•
bankruptcy within the last 8 years?  District When Case num District When Case num District When Case num  No Case num  No Service When Case num  Relationsh District When Case num  Relationsh District When Case num  Case num  No Service When Case num  Relationsh District When Case num  Case num  No Service When Case num  Relationsh District When Case num  Case num  Relationsh District When Case num  Relationsh District When Case num  Case num  No Service When Case num  No Service When Case num  Relationsh District When Case num  No Service When Case num  No	tee, and may do so only if your income is less than 150% of the official poverty line that u are unable to pay the fee in installments). If you choose this option, you must fill out
District When Case num District When Case num District When Case num  10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor Relationsh District When Case numt  Debtor Relationsh District When Case numt  Debtor Case numt	
District When Case num  10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor Relationsh District When Case number Debtor Relationsh District When Case number District When Cas	When Cose number
District When Case num  10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor Relationsh District When Case numb  Debtor Relationsh District When Case numb  11. Do you rent your No. Go to line 12.	
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor Relationsh District When Case numb Debtor Relationsh District When Case numb Debtor Case numb Debtor Case numb District When Case numb	
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor District Debtor When Case numb Debtor When Case numb Debtor Relationsh District When Case numb Case numb Debtor Go to line 12.	Wildli Oase Hullibel
filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?  Debtor	
Debtor Relationsh District When Case numb  Debtor Relationsh District When Case numb  11. Do you rent your	
Debtor Relationsh District When Case numb  11. Do you rent your	Relationship to you
District When Case number 11. Do you rent your No. Go to line 12.	When Case number, if known
11. Do you rent your $\square$ No. Go to line 12.	Relationship to you
	When Case number, if known
residence?  ■ Yes. Has your landlord obtained an eviction judgment against you?	an eviction judgment against you?
■ No. Go to line 12.	
<del>-</del>	Statement About an Eviction Judgment Against You (Form 101A) and file it with this

Debtor 1 Catherine M. Fallon Document Page 4 of 46 Case number (if known)

Par	Report About Any Bu	sinesses	You Own	as a Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code		
	it to this petition.		Chec	k the appropriate bo	x to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am r	not filing under Chap	ter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is						
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code		

Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 5 of 46

Debtor 1 Catherine M. Fallon

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 6 of 46

Deb	ctor 1 Catherine M. Fallo	on		Case	e number (if known)		
Par	t 6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	C. § 101(8) as "incurred by an				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you o	owe that are not consumer debts or	business debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	r 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exer ailable to distribute to unsecured c		ed and administrative expenses	
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		■ No				
			☐ Yes				
18.	How many Creditors do	<b>■</b> 1-49		☐ 1,000-5,000	□ 25,00	01-50,000	
	you estimate that you owe?	☐ 50-99		<b>5001-10,000</b>	<b>5</b> 0,00	01-100,000	
		□ 100-1 □ 200-9		☐ 10,001-25,000	☐ More	than100,000	
19.	How much do you estimate your assets to	<b>\$0 - \$</b>	50,000	□ \$1,000,001 - \$10 million		,000,001 - \$1 billion	
	be worth?		01 - \$100,000	□ \$10,000,001 - \$50 millio □ \$50,000,001 - \$100 millio		00,000,001 - \$10 billion 000,000,001 - \$50 billion	
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 mil		than \$50 billion	
20.	How much do you estimate your liabilities	\$0 - \$	·	\$1,000,001 - \$10 million		,,000,001 - \$1 billion	
	to be?		001 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 millio □ \$50,000,001 - \$100 millio		00,000,001 - \$10 billion 000,000,001 - \$50 billion	
			001 - \$300,000 001 - \$1 million	□ \$100,000,001 - \$500 mil		e than \$50 billion	
Par	t7: Sign Below						
For	you	I have ex	camined this petition, and I de-	clare under penalty of perjury that t	he information provide	d is true and correct.	
		If I have United S	chosen to file under Chapter 7 tates Code. I understand the r	7, I am aware that I may proceed, if relief available under each chapter,	eligible, under Chapte and I choose to proce	er 7, 11,12, or 13 of title 11, ed under Chapter 7.	
				not pay or agree to pay someone we notice required by 11 U.S.C. § 34		o help me fill out this	
		I request	relief in accordance with the	chapter of title 11, United States Co	ode, specified in this pe	etition.	
		bankrupt and 357	cy case can result in fines up	, concealing property, or obtaining to \$250,000, or imprisonment for u			
			nerine M. Fallon ne M. Fallon	Signature o	of Debtor 2		
			e of Debtor 1	•			
		Executed	d on <b>June 6, 2018</b>	Executed of	on		
			MM / DD / YYYY		MM / DD / YYYY		

Debtor 1 Catherine M. Fallon Page 7 of 46 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jane E. Nagle	Date	June 6, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Jane E. Nagle		
KOLLIAS & GIESE, P.C. Firm name		
400 S. Knoll St.		
Ste. B		
Wheaton, IL 60187		
Number, Street, City, State & ZIP Code		
Contact phone <b>630-407-1200</b>	Email address	jnagle@dupageattorneys.net
6309894 IL		
Bar number & State		

			<u> </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Catherine M. Fall	on		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				

☐ Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	1,723.58
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,723.58
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	8,484.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	52,862.47
	Your total liabilities	\$	61,346.47
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,625.24
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,272.83
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Case 18-16185 Doc 1 Document

Page 9 of 46
Case number (if known) Debtor 1 Catherine M. Fallon

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,180.01

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Tota	al claim
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	35,382.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	35,382.00

Fill in this inform		Document	t Page 10 of 46	•
	nation to identify your			
Debtor 1	Catherine M. Fall First Name	Middle Name	Last Name	
Debtor 2	First Name	Middle None	Lost Name	
(Spouse, if filing)		Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	
Case number _				Check if this is an amended filing
Official Fo	rm 106A/B			
Schedule	e A/B: Prop	erty		12/15
think it fits best. Be information. If more Answer every ques	e as complete and accura e space is needed, attach tion.	ate as possible. If two married p	e. If an asset fits in more than one category, beople are filing together, both are equally res On the top of any additional pages, write your	ponsible for supplying correct
	<u> </u>	<u>-                                      </u>	Iding, land, or similar property?	
_	, , ,	e interest in any residence, buil	iding, iand, or similar property?	
No. Go to Part				
☐ Yes. Where is	s the property?			
Part 2: Describe	Your Vehicles			
			les, whether they are registered or not? G: Executory Contracts and Unexpired Lea	
3. Cars, vans, tru	ucks, tractors, sport u	tility vehicles, motorcycles		
■ No				
☐ Yes				
			vehicles, other vehicles, and accessories ls, snowmobiles, motorcycle accessories	es
			ies from Part 2, including any entries for	
	Your Personal and Hous		allowing items?	Current value of the
	ods and furnishings	able interest in any of the fo	onowing items?	portion you own?  Do not deduct secured claims or exemptions.
Examples: Ma □ No	jor appliances, furniture	e, linens, china, kitchenware		
Yes. Descr	ibe			
	Ordinary	household goods and fu	ırnishings.	\$1,000.00
			<u></u>	

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

☐ Yes. Describe.....

Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 11 of 46 Case number (if known) Debtor 1 Catherine M. Fallon 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$500.00 Ordinary wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,500.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes.....

**TCF Bank** 

Schedule A/B: Property

Official Form 106A/B

17.1. Checking

\$223.58

page 2

Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Page 12 of 46

Case number (if known) Document Catherine M. Fallon

De	ebtor 1	Catherine M	. Fallon	Boodinent		Case number (if known)	
18.			or publicly traded stock investment accounts with		ey market accounts		
	■ No □ Yes		Institution or iss	uer name:			
19.	joint v		ock and interests in inc	orporated and uninco	rporated business	ses, including an interest in	an LLC, partnership, and
	■ No □ Yes.	Give specific inf	formation about them Name of entity:			% of ownership:	
	Negotia Non-na ■ No	able instruments egotiable instrun	orate bonds and other national checks, nents are those you cannot	cashiers' checks, prom	nissory notes, and n	noney orders.	
	⊔ Yes. (	Give specific into	ormation about them Issuer name:				
21.		nent or pension ples: Interests in		k), 403(b), thrift savings	accounts, or other	pension or profit-sharing plar	ns
	_	List each accour	nt separately.  Type of account:	Institution na	ame:		
22.	Your sl Examp		d deposits you have mad			from a company ecommunications companies	, or others
	■ No □ Yes.			Institution na	ame or individual:		
23.		ies (A contract fo	or a periodic payment of n	noney to you, either for	life or for a number	of years)	
	■ No □ Yes	ls	suer name and descriptio	n.			
24.			on IRA, in an account in 529A(b), and 529(b)(1).	a qualified ABLE prog	gram, or under a q	ualified state tuition progra	ım.
	☐ Yes	In	stitution name and descri	ption. Separately file the	e records of any inte	erests.11 U.S.C. § 521(c):	
	■ No			y (other than anything	ı listed in line 1), a	and rights or powers exercis	sable for your benefit
	⊔ Yes.	Give specific inf	ormation about them				
26.			rademarks, trade secrets nain names, websites, pro			nents	
	☐ Yes.	Give specific inf	formation about them				
	Examp  ■ No	oles: Building per			holdings, liquor lice	enses, professional licenses	
		•	formation about them				
Mo	oney or p	property owed	to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to y	ou .				
		Give specific info	ormation about them, inclu	uding whether you alrea	dy filed the returns	and the tax years	

De	ebtor 1	Catherine M. Fallon	Document	Page 13 of 46 Case number (if known)	
	Family Examp ■ No		usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
		Give specific information			
	Examp  ■ No	benefits; unpaid loans you made to		efits, sick pay, vacation pay, workers' comper	nsation, Social Security
		Give specific information			
31.			nealth savings account (	HSA); credit, homeowner's, or renter's insuran	ce
		Name the insurance company of each po Company name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
	If you a	erest in property that is due you from tre the beneficiary of a living trust, expect the has died.		ed surance policy, or are currently entitled to rece	vive property because
	☐ Yes.	Give specific information			
	Examp ■ No	against third parties, whether or not les: Accidents, employment disputes, in Describe each claim			
	Other c	ontingent and unliquidated claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim			
35.	Any fin ■ No	ancial assets you did not already list			
	☐ Yes.	Give specific information			
36		ne dollar value of all of your entries fr rt 4. Write that number here	om Part 4, including a	ny entries for pages you have attached	\$223.58
Pa	rt 5: Des	scribe Any Business-Related Property You	Own or Have an Interest	In. List any real estate in Part 1.	
	Do you o	wn or have any legal or equitable interest to Part 6	in any business-related p	roperty?	
	_	o to line 38.			
Pa		scribe Any Farm- and Commercial Fishing- ou own or have an interest in farmland, list it in		n or Have an Interest In.	
46.		own or have any legal or equitable in	terest in any farm- or o	commercial fishing-related property?	
		Go to line 47.			
Pa	rt 7:	Describe All Property You Own or Have a	an Interest in That You Dic	I Not List Above	
53.		have other property of any kind you of les: Season tickets, country club members			

☐ Yes. Give specific information.......

Page 14 of 46

Case number (if known) Document Debtor 1 Catherine M. Fallon

54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$0.00 Part 2: Total vehicles, line 5 56. \$0.00 57. Part 3: Total personal and household items, line 15 \$1,500.00 Part 4: Total financial assets, line 36 58. \$223.58 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... 62. \$1,723.58 Copy personal property total \$1,723.58

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$1,723.58

			Document	E	Page 15 of 46	_	
Fil	I in this inform	ation to identify your	case:				
De	ebtor 1	Catherine M. Fallo	on				
_		First Name	Middle Name	L	ast Name		
	ebtor 2 ouse if, filing)	First Name	Middle Name	L	ast Name		
Un	ited States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF	ILLIN	OIS		
Ca	ise number						
-	(nown)						Check if this is an amended filing
Oi	fficial For	m 106C					
S	chedule	C: The Pro	perty You Cla	im	as Exempt		4/16
the nee cas For spe any	property you liseded, fill out and the number (if known each item of pecific dollar amy applicable sta	ted on Schedule A/B: F attach to this page as o own). property you claim as ount as exempt. After atutory limit. Some exe	roperty (Official Form 106A/B) many copies of Part 2: Addition exempt, you must specify the natively, you may claim the femptions—such as those for	as yo nal Pa e amo full fai	ther, both are equally responsible for our source, list the property that you age as necessary. On the top of any ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain b	claim as ex additional p One way of ing exempt enefits, an	empt. If more space is pages, write your name and doing so is to state a led up to the amount of d tax-exempt retirement
iun exe	ds—may be un emption to a pa	ılimited in dollar amou	ınt. However, if you claim an	exen	nption of 100% of fair market valu letermined to exceed that amoun	e under a l	aw that limits the
Pa	rt 1: Identify	the Property You Cla	im as Exempt				
1.	Which set of	exemptions are you cl	aiming? Check one only, eve	n if yo	our spouse is filing with you.		
	■ You are cla	iming state and federal	nonbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	☐ You are cla	iming federal exemption	ns. 11 U.S.C. § 522(b)(2)				
2.	For any prope	erty you list on Sched	ule A/B that you claim as exe	empt,	fill in the information below.		
		n of the property and line	on Current value of the portion you own	Am	ount of the exemption you claim	Specific la	ws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Ordinary ho furnishings.	usehold goods and	\$1,000.00		\$1,000.00	735 ILC	S 5/12-1001(b)
	Line from Sche				100% of fair market value, up to any applicable statutory limit		
		earing apparel.	\$500.00		\$500.00	735 ILC	S 5/12-1001(a)
	Line nom Sche	edule AVD. TTT			100% of fair market value, up to any applicable statutory limit		
	Checking: T	CF Bank edule A/B: 17.1	\$223.58		\$223.58	735 ILCS 5/12-1001(b)	
Be as complete property the eded, fill case numb For each it specific do any applic funds—mater exemption to the application of	Line nom Sche	edule AVD. 11.1			100% of fair market value, up to any applicable statutory limit		
3.	(Subject to adj	ustment on 4/01/19 and	, ,	ises fi	led on or after the date of adjustme	,	

□ No□ Yes

Case 18-16185		ed 06/06/18 ocument	Entered Page 16	06/06/18 10:: of 46	24:30	Desc M	1ain
Fill in this information to identify you	ur case:						
Debtor 1 Catherine M. Fa	ıllon						
First Name	Middle Nam	e	Last Name				
Debtor 2 (Spouse if, filing) First Name	Middle Nam	e	Last Name				
United States Bankruptcy Court for the	: NORTHERN I	DISTRICT OF ILL	INOIS				
Case number						_	if this is an led filing
Official Form 106D							
Schedule D: Creditors	Who Have	e Claims S	Secured	by Property	У		12/15
Be as complete and accurate as possible. s needed, copy the Additional Page, fill it number (if known).							
. Do any creditors have claims secured b	y your property?						
☐ No. Check this box and submit t	his form to the cou	rt with your other	schedules. You	u have nothing else t	o report on	this form.	
■ Yes. Fill in all of the information	below.						
Part 1: List All Secured Claims							
2. List all secured claims. If a creditor has	more than one secure	ed claim list the cred	ditor separately	Column A	Column B		Column C
for each claim. If more than one creditor has much as possible, list the claims in alphabeti	s a particular claim, lis	st the other creditors	in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of of that supp claim		Unsecured portion If any
2.1 Chase Auto Finance	Describe the prop	erty that secures tl	he claim:	\$8,484.00	Oldilli	\$0.00	\$8,484.00
Creditor's Name	Jeep Cheroke	e Repossessed	k				
PO Box 901003 Fort Worth, TX 76101	As of the date you apply.  Contingent	ı file, the claim is: (	Check all that				
Number, Street, City, State & Zip Code	Unliquidated						
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Ch	neck all that apply.					
■ Debtor 1 only	An agreement	ou made (such as n	nortgage or secu	red			
Debtor 2 only	car loan)						
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (s	such as tax lien, mec	hanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien f	rom a lawsuit					
Check if this claim relates to a community debt	Other (including	g a right to offset) _					

Add the dollar value of your entries in Column A on this page. Write that number here:

\$8,484.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$8,484.00

Last 4 digits of account number

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

1424

Date debt was incurred 06/07/2016

	0000 10 10100 1	Document	Page 1	7 of 46	<b>00</b> D00	o mani
Fill in this	information to identify your o		1 (3(3() 1	VI V		
Debtor 1	Catherine M. Fallo	nn -				
Dobtor 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filir	ng) First Name	Middle Name	Last Name			
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS			
Case numb	ner					
(if known)					□ C	heck if this is an
					ar	mended filing
Official I	E0## 406E/E					
	Form 106E/F	ha Haya Haaaayyad	Claima			4 O / 4 E
		ho Have Unsecured  e Part 1 for creditors with PRIORITY				12/15
Schedule D: eft. Attach t name and ca	Creditors Who Have Claims Secu he Continuation Page to this page ase number (if known).	red Leases (Official Form 106G). Do red by Property. If more space is n e. If you have no information to rep	eeded, copy t	he Part you need, fill it ou	it, number the ent	ries in the boxes on the
	List All of Your PRIORITY Un					
_ `	creditors have priority unsecured	d claims against you?				
	Go to Part 2.					
☐ Yes.						
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any	creditors have nonpriority unsec	ured claims against you?				
☐ No.	You have nothing to report in this pa	art. Submit this form to the court with y	our other sche	dules.		
Yes.						
unsecur	ed claim, list the creditor separately	aims in the alphabetical order of the for each claim. For each claim listed, st the other creditors in Part 3.lf you h	identify what t	ype of claim it is. Do not list	claims already incl	uded in Part 1. If more
						Total claim
4.1 <b>AF</b>	FNI	Last 4 digits of acco	ount number	6359		\$409.00
	npriority Creditor's Name	\All	·	04/44/2047		
	D Box 3097 oomington, IL 61702	When was the debt	incurrea?	01/11/2017		
	mber Street City State Zlp Code	As of the date you fi	ile, the claim i	s: Check all that apply		
Wh	no incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and ano	ther Type of NONPRIORI	TY unsecured	l claim:		
	Check if this claim is for a comn	nunity				
del				ration agreement or divorce	that you did not	
	No			g plans, and other similar de	ebts	
	Yes	Other. Specify	Collections	- Comcast		

Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 18 of 46

Debtor 1 Catherine M. Fallon Case number (if know) American Honda Finance 4.2 Last 4 digits of account number 3310 \$4.092.00 Nonpriority Creditor's Name 2170 Point Blvd. When was the debt incurred? 07/31/2010 Ste. 100 Elgin, IL 60123 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Car loan, repossessed in 2012 ☐ Yes 4.3 Capital One Bank USA Last 4 digits of account number 4190 \$377.00 Nonpriority Creditor's Name PO Box 30281 When was the debt incurred? 09/01/2017 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card debt ☐ Yes 4.4 Capital One Bank USA NA \$2,888.00 Last 4 digits of account number 3238 Nonpriority Creditor's Name PO Box 30281 When was the debt incurred? 10/04/2014 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card debt ☐ Yes

Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 19 of 46

Debtor 1 Catherine M. Fallon Case number (if know) 4.5 Credit One Bank Last 4 digits of account number 6267 \$667.00 Nonpriority Creditor's Name PO Box 98872 When was the debt incurred? 08/02/2017 Las Vegas, NV 89193 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card debt ☐ Yes 4.6 **Department of Education/Navient** Last 4 digits of account number 2013 \$35,382.00 Nonpriority Creditor's Name 123 Justison St. When was the debt incurred? 01/23/2013 3rd FI Wilmington, DE 19801 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Student Loan debt 4.7 **Elmhurst Memorial Hospital** Last 4 digits of account number \$1,556.26 Nonpriority Creditor's Name 155 E Brush Hill Rd When was the debt incurred? Elmhurst, IL 60126 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical bills

Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 20 of 46

Debtor 1 Catherine M. Fallon Case number (if know) 4.8 Gwendolyn J. Sterk Last 4 digits of account number \$1.500.00 Nonpriority Creditor's Name 11508 W. 183rd Place NW When was the debt incurred? 3/6/2018 Orland Park, IL 60467 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Judgment 4.9 Loyola Hospital \$2,891.21 Last 4 digits of account number Nonpriority Creditor's Name 2160 S. First Ave. When was the debt incurred? Maywood, IL 60153 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical bills** Other. Specify 4.1 **Merchants Credit Guide** 6102 \$100.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W. Jackson Blvd. When was the debt incurred? 04/11/2016 Ste. 700 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Collections - Elmhurst Memorial Hospital** 

Eilad 06/06/19 Entered 06/06/18 10:24:30 Casa 18-16185 Docc Main

	Case 10-10103 Duc 1	Desument Dags 21 of 46	iaiii
Debt	or 1 Catherine M. Fallon	Document Page 21 of 46 Case number (if know)	
4.1 1	Merchants Credit Guide	Last 4 digits of account number 6137	\$100.00
	Nonpriority Creditor's Name 223 W. Jackson Blvd. Ste. 700	When was the debt incurred? 05/16/2016	
	Chicago, IL 60606		
	Number Street City State ZIp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	<u> </u>	☐ Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Collections - Elmhurst Memorial Hospital	
4.1	Pediatrix Medical Group		\$400.00
2	Nonpriority Creditor's Name	Last 4 digits of account number	<b>Ψ400.00</b>
	1401 E State St. Rockford, IL 61104	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical bills	
4.1 3	Wakenight & Associates	Last 4 digits of account number	\$2,500.00
	Nonpriority Creditor's Name  001 Butterfield Rd.	When was the debt incurred? 2017	
	#268 Downers Grove, IL 60515		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Attorney fees

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ No

☐ Yes

report as priority claims

Is the claim subject to offset?

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 18-16185 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Doc 1 Page 22 of 46 Case number (if know) Document

Debtor 1 Catherine M. Fallon

### Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 35,382.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 17,480.47
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 52,862.47

Fill in this infor	mation to identify your	case:		
Debtor 1	Catherine M. Fall	on		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Cagan Management Group, Inc.
3856 Oakton St.
Skokie, IL 60076

State what the contract or lease is for
Residential apartment lease.

		Docume	ent Page 24 d	of 46
Fill in this i	nformation to identify your	case:		
Debtor 1	Catherine M. Fallo	n e		
Dobtor !	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing	g) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
0				
Case numb	er			☐ Check if this is an
				amended filing
Official	Form 106H			
	ule H: Your Cod	obtors		42/45
Scried	ule H. Tour Cou	EDIOI 2		12/15
•	and case number (if known). ou have any codebtors? (if y			as a codebtor.
■ Na				
■ No □ Yes				
<b>—</b> 103				
	<b>in the last 8 years, have you</b> ı, California, Idaho, Louisiana,			y? (Community property states and territories include ington, and Wisconsin.)
■ Na. 7	Go to line 3.			
_	Did your spouse, former spou	se or legal equivalent live	with you at the time?	
<b>—</b> 103.	Dia your spouse, former spoo	iso, or logal equivalent live	with you at the time:	
in line 2 Form 1	2 again as a codebtor only if	that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
Na	ame, Number, Street, City, State and ZII	Code		Check all schedules that apply:
3.1				☐ Schedule D, line
	lame			☐ Schedule E/F, line
				☐ Schedule G, line
	Obs. at			
	lumber Street ity	State	ZIP Code	
2.0				Cabadida D. lina
3.2	lame			Schodule D, line
				☐ Schedule E/F, line ☐ Schedule G, line
_				
	lumber Street ity	State	ZIP Code	
C	···y	Gidio	Zii. Code	

# Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 25 of 46

	in this information to iden otor 1 Catl	tify your ca herine M.										
	btor 2	nemie wi	FallOll				_					
	buse, if filing)						_					
Uni	ited States Bankruptcy Co	ourt for the:	NORTHERN DISTRIC	T OF IL	LINOIS		_					
l .	se number							Chec	k if this is:			
(If Kr	nown)								n amende	ed filing ent showing	nootnotitio	n chantar
										as of the fol		
0	fficial Form 106	<u> </u>						- N	// / DD/ Y	YYY		
S	chedule Ι: Υοι	ır Inco	ome									12/15
atta Par	use. If you are separated cha separate sheet to the table to table to the table to table to the table to	his form. (										
1.	Fill in your employment information.	nt		Debto	or 1				Debtor 2	2 or non-fili	ng spouse	е
	If you have more than o		Employment status	■ Employed				☐ Empl	oyed			
	attach a separate page information about additi			☐ Not employed					☐ Not e	mployed		
	employers.		Occupation	Exec	utive Direc	tor						
	Include part-time, seaso self-employed work.	onal, or	Employer's name	Oakb	rook Terra	ce Park	Dis	trict				
	Occupation may include or homemaker, if it appl		Employer's address		5 Ardmore Park, IL 60							
			How long employed th	nere?	3.5 yea	rs			_			
Pai	ft 2: Give Details A	bout Mon	thly Income									
	mate monthly income as use unless you are separa		ate you file this form. If y	you have	e nothing to r	eport for	any I	ine, write	e \$0 in the	space. Incl	ude your n	on-filing
	ou or your non-filing spous e space, attach a separate			mbine th	ne informatio	n for all e	emplo	yers for	that perso	on on the line	es below. I	f you need
								For Del	btor 1	For Debi	tor 2 or g spouse	
2.			y, and commissions (be alculate what the monthly			2.	\$	5	,704.62	\$	N/A	<u>\</u>
3.	Estimate and list mon	thly overti	me pay.			3.	+\$		0.00	+\$	N/A	<u>\</u>

5,704.62

N/A

Calculate gross Income. Add line 2 + line 3.

# Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 26 of 46

Deb	otor 1	Catherine M. Fallon			Case	e number (if k	nown)				
					Fo	r Debtor 1			or Debtor on-filing s		
	Cop	y line 4 here	4.		\$_	5,70	4.62	\$	9	N/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	1,590	0 06	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5k		\$	<u> </u>	6.70	\$-		N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$		0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$		0.00	\$		N/A	_
	5e.	Insurance	56		\$		2.62	\$		N/A	_
	5f.	Domestic support obligations	5f		\$		0.00	\$		N/A	_
	5g.	Union dues	50		\$		0.00	\$		N/A	_
	5h.	Other deductions. Specify:		า.+	\$		0.00	+ \$		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	- 6.		* – \$	2,079		\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ \$	3,62		\$		N/A	_
8.		all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross	•		<b>~</b> _	3,02	J. <u>Z</u>	Ψ_		17/2	_
		receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88	a.	\$		0.00	\$		N/A	
	8b.	Interest and dividends	8b	э.	\$		0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$_ \$		0.00	\$ \$		N/A	_
	8d. 8e.	Unemployment compensation Social Security	80 86		\$ \$		0.00	\$ \$		N/A N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f	:	\$_		0.00	\$_		N/A	_
	8g.	Pension or retirement income	80	-	\$_		0.00	\$_		N/A	_
	8h.	Other monthly income. Specify:	_ 8r _	า.+	\$_		0.00	+ \$_		N/A	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$		0.00	\$_		N/A	4
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,625.24	+ \$		N/A	= \$	3,625.24
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		3,023.24	*		11//		3,023.24
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep					•	Schedule	e <i>J</i> . +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies							e. 12.	\$	3,625.24
13	Do s	you expect an increase or decrease within the year after you file this form	2							Combi month	ned ly income
10.		No.  Yes Explain:									

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:			ı		
Deb	otor 1	Catherine M.	Fallon			Ch	neck if this is:	
Dob	otor 2						An amended filin	•
	ouse, if filing)							owing postpetition chapter of the following date:
Unit	ted States Bankr	uptcy Court for the:	NORTH	ERN DISTRICT OF ILL	INOIS		MM / DD / YYYY	<del>,</del>
Cas	se number							
(If k	nown)							
O <sup>1</sup>	fficial Fo	rm 106J						
S	chedule	J: Your I	 Expen	ises				12/1
Be info	as complete a	and accurate as	possible. eded, atta	If two married people ch another sheet to th				
Par		ibe Your House	hold					
1.	Is this a join							
	■ No. Go to □ Yes. <b>Doe</b>	iline 2. <b>s Debtor 2 live i</b>	n a separa	ate household?				
	□ N							
	□ Ye	es. Debtor 2 mus	t file Officia	al Form 106J-2, <i>Expens</i>	ses for Separate House	ehold of De	ebtor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state				Dougleton		4	□ No
	dependents	names.			Daughter		1	_
					Daughter		3	■ Yes
					Daughter		4	□ No ■ Yes
					Dauginoi			_ □ res □ No
	_							_ Yes
3.	expenses of	enses include f people other th d your depender	han _	No Yes				
Est	imate your ex		our bankru	uptcy filing date unless				hapter 13 case to report of the form and fill in the
the		n assistance and		government assistanc luded it on <i>Schedule I</i>			Your ex	penses
•		•						
4.		or home owners and any rent for the		ses for your residence r lot.	. Include first mortgag		\$	2,686.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.	·	13.83
		maintenance, re owner's associati		pkeep expenses Iominium dues		4c. 4d.	·	20.00 0.00
5.				our residence, such as	home equity loans		\$	0.00

# Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 28 of 46

Debtor 1 Catherine M. Fallon	Case number (if known)							
6. Utilities:								
6a. Electricity, heat, natural gas	6a. \$	220.21						
6b. Water, sewer, garbage collection	6b. \$	193.87						
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	376.90						
6d. Other. Specify:	6d. \$	0.00						
Food and housekeeping supplies	7. \$	400.00						
Childcare and children's education costs	8. \$	2,000.00						
Clothing, laundry, and dry cleaning	9. \$	0.00						
). Personal care products and services	10. \$	25.00						
Medical and dental expenses	11. \$	50.00						
2. <b>Transportation.</b> Include gas, maintenance, bus or train fare.	Π. Ψ	30.00						
Do not include car payments.	12. \$	200.00						
B. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	20.00						
Charitable contributions and religious donations	14. \$	0.00						
5. Insurance.	Ψ	0.00						
Do not include insurance deducted from your pay or included in lines 4 or 20.								
15a. Life insurance	15a. \$	0.00						
15b. Health insurance	15b. \$	0.00						
15c. Vehicle insurance	15c. \$	67.02						
15d. Other insurance. Specify:	15d. \$	0.00						
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		0.00						
Specify:	16. \$	0.00						
7. Installment or lease payments:		0.00						
17a. Car payments for Vehicle 1	17a. \$	0.00						
17b. Car payments for Vehicle 2	17b. \$	0.00						
17c. Other. Specify:	17c. \$	0.00						
17d. Other. Specify:	17d. \$	0.00						
Your payments of alimony, maintenance, and support that you did not report as								
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		0.00						
Other payments you make to support others who do not live with you.	\$	0.00						
Specify:	19.							
Other real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Your Income.							
20a. Mortgages on other property	20a. \$	0.00						
20b. Real estate taxes	20b. \$	0.00						
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00						
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00						
20e. Homeowner's association or condominium dues	20e. \$	0.00						
. Other: Specify:	21. +\$	0.00						
· · ·		0.00						
2. Calculate your monthly expenses								
22a. Add lines 4 through 21.	\$	6,272.83						
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$							
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	6,272.83						
Calculate very mantibly not income		· · · · · · · · · · · · · · · · · · ·						
3. Calculate your monthly net income.	22a ¢	0.005.01						
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,625.24						
23b. Copy your monthly expenses from line 22c above.	23b\$	6,272.83						
22a Subtract value monthly avanage from the state of the state of								
<ol> <li>Subtract your monthly expenses from your monthly income.</li> <li>The result is your monthly net income.</li> </ol>	23c. \$	-2,647.59						
The result is your monthly het income.	200.	_,						
4. Do you expect an increase or decrease in your expenses within the year after y	ou file this form?							
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a							
modification to the terms of your mortgage?	3 3 1 7 2 2 2 2 2 2 2 2 2							
■ No.								
□ Yes Explain here:								

# Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 29 of 46

Fill in this infor	rmation to identify your	case:			
Debtor 1	Catherine M. Falle				
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
If two married p You must file th obtaining mone	eople are filing together	n connection with a bank	nsible for supplying cor		
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out I	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				y Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	ed with this declaration and	i
X /s/ Cat	therine M. Fallon		X		
Cathe	rine M. Fallon ure of Debtor 1		Signature of	Debtor 2	
Date	June 6, 2018		Date		

# Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 30 of 46

	in this inform	ation to identify you				
		nation to identify you				
Dei	otor 1	Catherine M. Fa	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	se number				_	theck if this is an mended filing
Sta Be a info	as complete a	of Financial nd accurate as possore space is needed,	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write you	
	<u> </u>	i). Answer every que etails About Your Ma	stion. arital Status and Where You	ı Lived Before		
1.		current marital statu				
	☐ Married ■ Not mar	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
<b>3.</b> state					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out Scl	hedule H: Your Codebtors (O	fficial Form 106H).		
Par	t 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operating ureceived from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$17,960.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Document Page 31 of 46 Case number (if known) Debtor 1 Catherine M. Fallon Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$70,832.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$70,832.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source (before deductions Describe below. (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

□ Yes

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount vou Was this payment for ... still owe paid

Page 32 of 46
Case number (if known) Document Debtor 1 Catherine M. Fallon

7.	<ul> <li>Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?         Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.     </li> <li>No</li> <li>Yes. List all payments to an insider.</li> </ul>					al partner; corporations agent, including one for
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos  No Yes. List all payments to an insider		ments or transfer a	ny property on a	ccount of a d	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures	<b>,</b>			
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
	Thomas Bell v. Catherine Fallon 17 F 691	Parentage	Eighteenth Jud 505 N. County Wheaton, IL 60	Farm Rd.	☐ Pending ☐ On appe ☐ Conclud	eal
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.		rty repossessed, f	oreclosed, garnis	hed, attache	d, seized, or levied?
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened		2017		
	Chase Bank USA PO Box 15298	Jeep Cherokee				Unknown
	Wilmington, DE 19850	<ul><li>■ Property was repossessed.</li><li>□ Property was foreclosed.</li><li>□ Property was garnished.</li></ul>				
		☐ Property was attached	I, seized or levied.			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		uding a bank or fir	nancial institution	, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took		action was	Amount
				taken		

Document Page 33 of 46 Case number (if known) Debtor 1 Catherine M. Fallon 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο ☐ Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was **Address** payment **Email or website address** made Person Who Made the Payment, if Not You Kollias & Giese, P.C. 4/24/18 \$1,800.00 \$1,800 400 S. Knoll St. Ste. B Wheaton, IL 60187 service@dupageattorneys.net

Case 18-16185

Doc 1

Filed 06/06/18

Entered 06/06/18 10:24:30

Desc Main

Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Page 34 of 46 Case number (if known) Document

Debtor 1 Catherine M. Fallon

17.	Within 1 year before you filed for bankruptopromised to help you deal with your credit.  Do not include any payment or transfer that you  No  Yes. Fill in the details.	ors or to make payments			transfer any proper	ty to anyone who
	Person Who Was Paid Address	Description and v transferred	alue of any propert	-	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your I Include both outright transfers and transfers minclude gifts and transfers that you have alrea  No	ousiness or financial affa nade as security (such as t	nirs? he granting of a sect			
	Yes. Fill in the details.	<b>5</b>				
	Person Who Received Transfer Address	Description and v property transferr			y property or eceived or debts nange	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pn No ☐ Yes. Fill in the details.		y property to a self	-settled trus	t or similar device o	f which you are a
	Name of trust	Description and v	alue of the propert	y transferred	1	Date Transfer was made
Par	18: List of Certain Financial Accounts, Ir	setrumente Safe Denocit	Boyes and Storag	na I Inite		
20.	Within 1 year before you filed for bankrupte sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial accour	nts; certificates of o		-	
	Yes. Fill in the details.		_			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account of instrument	close	account was ed, sold, ed, or sferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, any sa	afe deposit b	oox or other deposit	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		scribe the co	ontents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than your	home within 1 yea	r before you	filed for bankruptc	<b>/</b> ?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		scribe the co	ontents	Do you still have it?

Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Page 35 of 46
Case number (if known) Document

Debtor 1 Catherine M. Fallon

Par	t 9: Identify Property You Hold or Control for S	omeone Else						
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any prope	erty y	ou borrowed from, are storing for	, or hold in trust			
	No The state of th							
	Yes. Fill in the details.	Miles and the discount of the control of the contro		and the discount of	Walana			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value			
Par	t 10: Give Details About Environmental Informat	tion						
For	the purpose of Part 10, the following definitions a	pply:						
	Environmental law means any federal, state, or lotoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	, land, soil, surface water, groui	_	•				
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s	-	ıl law,	, whether you now own, operate, o	or utilize it or used			
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si		us wa	ste, hazardous substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings that you	u know about, regardless of who	en the	ey occurred.				
24.	Has any governmental unit notified you that you	may be liable or potentially liab	le un	der or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)							
25.	Have you notified any governmental unit of any r	elease of hazardous material?						
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	ınd	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or administ	rative proceeding under any en	viron	mental law? Include settlements a	and orders.			
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	iture of the case	Status of the case			
Par	t 11: Give Details About Your Business or Conn	ections to Any Business						
27.	Within 4 years before you filed for bankruptcy, di	id you own a business or have a	any o	f the following connections to any	business?			
	☐ A sole proprietor or self-employed in a tr	ade, profession, or other activity	y, eith	ner full-time or part-time				
	☐ A member of a limited liability company (	LLC) or limited liability partners	hip (I	LLP)				
	☐ A partner in a partnership	••	. `	•				
	☐ An officer, director, or managing executive	ve of a corporation						

lacksquare An owner of at least 5% of the voting or equity securities of a corporation

Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Page 36 of 46 Document Case number (if known) Debtor 1 Catherine M. Fallon No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Catherine M. Fallon Signature of Debtor 2 Catherine M. Fallon Signature of Debtor 1 Date Date June 6, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes

■ No

# Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 37 of 46

Fill in this inform	nation to identify your	case.		
Debtor 1				
Debtor i	Catherine M. Fall	Middle Name	Last Name	_
Debtor 2 (Spouse if, filing)	First Name	Middle Neme	Last Name	_
		Middle Name		
United States Ba	nkruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	_
Case number _				
(if known)				☐ Check if this is an amended filing
Official Fo	rm 108			
		n for Indiv	viduals Filing Under Chr	ontor 7
Statemen	it of intentio	ii ioi iiiaiv	viduals Filing Under Cha	apter 7 12/15
If you are an indi	vidual filing under cha	pter 7, you must fil	I out this form if:	
	e claims secured by yo	-		
-	ed personal property a		•	
	ver is earlier, unless th		you file your bankruptcy petition or by the c e time for cause. You must also send copies	
	eople are filing togethe	r in a joint case, bo	th are equally responsible for supplying cor	rect information. Both debtors must
J		ale. If more space is	s needed, attach a separate sheet to this for	m. On the top of any additional pages
	our name and case nur		s needed, attach a separate sheet to this for	ii. On the top of any additional pages,
Port 1: List Va	our Creditors Who Hav	o Socured Claims		
Part 1: List Yo	our Creditors willo hav	e Secured Claims		
1. For any credite information be	-	art 1 of Schedule D	: Creditors Who Have Claims Secured by Pr	operty (Official Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the proper secures a debt?	ty that Did you claim the property as exempt on Schedule C?
Creditor's C	hase Auto Finance		Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	<b>-</b> v
Description of	Jeep Cherokee Re	possessed	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	осор опогоности	poodoou	Retain the property and [explain]:	
securing debt:			-	
Part 2: List Yo	our Unexpired Persona	I Property I eases		
For any unexpire	ed personal property le	ase that you listed	in Schedule G: Executory Contracts and Un	
			expired leases are leases that are still in effithe trustee does not assume it. 11 U.S.C. § 3	
Describe your u	nexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea	ased			L NO
Property:				☐ Yes
Lessor's name:				□ No
Description of lea	ased			LI INO
Property:				☐ Yes
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

# Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 38 of 46

Debtor 1	Catherine M. Fallon	Case number (if known)
	on of leased	
Property:		☐ Yes
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Lessor's	name: on of leased	□ No
Property:		☐ Yes
Lessor's name: Description of leased Property:		□ No
		☐ Yes
Lessor's		□ No
Property:	on of leased	☐ Yes
Part 3:	Sign Below	
	nalty of perjury, I declare that I have indicat that is subject to an unexpired lease.	ed my intention about any property of my estate that secures a debt and any personal
χ /s/ (	Catherine M. Fallon	X
	herine M. Fallon ature of Debtor 1	Signature of Debtor 2
Oigi	addie of Bobiol 1	
Date	June 6, 2018	Date

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-16185 Doc 1 Filed 06/06/18 Entered 06/06/18 10:24:30 Desc Main Document Page 43 of 46

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court**Northern District of Illinois

In	re	Catherine M. I	Fallon				Case	No.		
						Debtor(s)	Chap		7	
		DIS	CLOS	SURE OF CON	MPENSAT	ION OF ATTO	RNEY FOR	R DE	BTOR(S)	
1.	cor	mpensation paid to	me with	nin one year before t	he filing of the	tify that I am the attorn petition in bankruptcy onnection with the bar	, or agreed to be	paid	to me, for services	
		For legal service	es, I have	e agreed to accept			\$		1,800.00	
		Prior to the filin	g of this	statement I have rec	ceived		\$		1,800.00	
									0.00	
2.	Th			on paid to me was:						
		Debtor		ther (specify):						
3.	Th	e source of compe	ensation t	o be paid to me is:						
		■ Debtor		ther (specify):						
4.	_	I have not agreed	d to share	e the above-disclosed	d compensation	with any other person	unless they are	memb	pers and associates	of my law firm
		I have agreed to	share the	above-disclosed co	mpensation with	h a person or persons ve e people sharing in the	who are not mer	nbers	or associates of my	•
5.	In	return for the abo	ve-disclo	sed fee, I have agree	ed to render lega	al service for all aspec	ts of the bankru	ptcy ca	ase, including:	
	b. c.	Preparation and f Representation of [Other provisions Negotiation reaffirmat	iling of a f the debt s as neede ons with ion agre	ny petition, schedule for at the meeting of ed] a secured credito	es, statement of creditors and cors rs to reduce t lications as n	ice to the debtor in det affairs and plan which onfirmation hearing, a o market value; ex- eeded; preparation I goods.	n may be require nd any adjourne emption plant	ed; d hear ning;	rings thereof;	d filing of
6.	Ву	Represen	tation o	r(s), the above-disclor f the debtors in a ary proceeding.	osed fee does no iny discharge	t include the following ability actions, jud	g service: icial lien avoid	dance	es, relief from st	ay actions or
					CERT	TIFICATION				
this		ertify that the fore kruptcy proceedin		a complete statemen	t of any agreem	ent or arrangement for	r payment to me	for re	epresentation of the	e debtor(s) in
	Jun	ne 6, 2018				/s/ Jane E. Nagle				
	Date	e				Jane E. Nagle				
						Signature of Attornation KOLLIAS & GIES				
						400 S. Knoll St.	·=, i .O.			
						Ste. B				
						Wheaton, IL 6018				
						630-407-1200 Fa jnagle@dupagea		85		
						Name of law firm	ittoi neys.net			
1						J vov j vv				

# **United States Bankruptcy Court**Northern District of Illinois

In re	Catherine M. Fallon		Case No.	
III IE	Cattletine W. I anon	Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR MA	ATRIX	
		Number of 6	Creditors:	14
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credito	ors is true and correct	to the best of my
Date:	June 6, 2018	/s/ Catherine M. Fallon Catherine M. Fallon Signature of Debtor		

AFNI PO Box 3097 Bloomington, IL 61702

American Honda Finance 2170 Point Blvd. Ste. 100 Elgin, IL 60123

Cagan Management Group, Inc. 3856 Oakton St. Skokie, IL 60076

Capital One Bank USA PO Box 30281 Salt Lake City, UT 84130

Capital One Bank USA NA PO Box 30281 Salt Lake City, UT 84130

Chase Auto Finance PO Box 901003 Fort Worth, TX 76101

Credit One Bank PO Box 98872 Las Vegas, NV 89193

Department of Education/Navient 123 Justison St. 3rd Fl Wilmington, DE 19801

Elmhurst Memorial Hospital 155 E Brush Hill Rd Elmhurst, IL 60126

Gwendolyn J. Sterk 11508 W. 183rd Place NW Orland Park, IL 60467

Loyola Hospital 2160 S. First Ave. Maywood, IL 60153 Merchants Credit Guide 223 W. Jackson Blvd. Ste. 700 Chicago, IL 60606

Pediatrix Medical Group 1401 E State St. Rockford, IL 61104

Wakenight & Associates 001 Butterfield Rd. #268 Downers Grove, IL 60515